

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # A00000000139

1. Entity Name
THE OAKS AT OMNI, LTD.



Principal Place of Business
2950 S.W. 27TH AVENUE, SUITE #200
MIAMI, FL 33133

Mailing Address
2950 S.W. 27TH AVENUE, SUITE #200
MIAMI, FL 33133

\$508.75



01172006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0981856

Applied For
☐ Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional**
Fee Required

6. Name and Address of Current Registered Agent

MCDONOUGH, BRIAN J
2200 MUSEUM TOWER
150 WEST FLAGLER STREET
MIAMI, FL 33130

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IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

FILE NOW!!! FEE IS \$500.00
After May 1, 2006, Fee will be \$900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT # **P00000004147**
NAME **TOG FORT MYERS, INC.**
STREET ADDRESS **2937 S.W. 27TH AVENUE, SUITE 303**
CITY-ST-ZIP **MIAMI, FL 33133**

DOCUMENT # **P00000005379**
NAME **FORT MYERS OMNI APARTMENTS, INC.**
STREET ADDRESS **180 N.W. 139TH STREET**
CITY-ST-ZIP **MIAMI, FL 33133**

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05/16/06-80002-023 508.75

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14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE